

MEMORIAL

SOLICITING

ENLARGED AND IMPROVED ACCOMMODATIONS

FOR THE

INSANE OF THE STATE OF TENNESSEE,

BY THE ESTABLISHMENT OF

A NEW HOSPITAL.

BY MISS D. L. DIX.

NOVEMBER, 1847.

PRINTED BY ORDER OF THE GENERAL ASSEMBLY.

NASHVILLE, TENN.

B. R. M'KENNIE, PRINTER, WHIG AND POLITICIAN OFFICE.

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COLLECTOR

ENTRANCE AND DEPARTURE RECORDS

NEW YORK

STATE OF THE STATE OF TENNESSEE

AT THE DEPARTMENT OF

A NEW HOSPITAL

NEW YORK N. Y.

REPORT BY ORDER OF THE GENERAL ASSEMBLY

NOTHING BUT

ASHVILLE

E. E. WELLS, SECRETARY, NEW YORK HOSPITAL

1847

MEMORIAL.

*To the Honorable,
the General Assembly of the State of Tennessee.*

GENTLEMEN:

I ask to lay before you, briefly and distinctly, the necessities and claims of a numerous, and unfortunately, an increasing class of your fellow-citizens—I refer to the Insane of this State; the various distresses of whose various condition can be fully appreciated only by those who have witnessed their miseries. Pining in cells and dungeons, pent in log-cabins, bound with ropes, restrained by leathern throngs, burthened with chains—now wandering at large, alone and neglected, endangering the security of property, often inimical to human life; and now thrust into cells, into pens, or wretched cabins, excluded from the fair light of heaven, from social and healing influences—cast out, cast off, like the Pariah of the Hindoos, from comfort, hope, and happiness, such is the present actual condition of a large number of your fellow-citizens—useless and helpless, life is at once grievous to themselves, and a source of immeasurable sorrow to all beside.

In some cases, indeed, pitying friends strive to procure comforts, and exercise consoling cares: how little, under the cloud of this malady, these avail, many can bear sorrowful testimony. The only remedy or alleviation is to be found

in *rightly organized Hospitals*, adapted to the special care the peculiar malady of the Insane so urgently demands.

Made conversant with the cruel sufferings and measureless distresses of which I speak, by patient investigations, reaching through long and weary years, over the length and breadth of our land, I represent the existence of troubles no imagination can exaggerate, and I have come now to Tennessee, as the advocate and friend of those who cannot plead their own cause, and for those who have no friend to protect and succor them, in this, the extremity of human dependence.

I appeal confidently to the Legislature of Tennessee, in which is vested the power, by the will of a whole people, to interpose relief, and timely to apply a remedy to heal, or at least to mitigate, the ravages of this cruel malady.

This subject, gentlemen, is not new to you. Good, humane, and liberal men in this State, more than eight years since, discerned the necessities of the Insane, and applied their energies to the establishment of a Hospital, in which it was hoped and designed these should find relief through the application of physical remedies and moral treatment. Why the just and liberal spirit of the Legislature which first acknowledged in Tennessee, the claims of the Insane to become wards of the State, and through its generous guardianship to find healing influences, has not been practically carried out, it is not my province to search into and declare.

The intention on the part of the public was correct, and the means ample; but that the experience of other States in the construction of the Hospital, and in its internal organization, was not consulted, or, if consulted, not made instructive, is evident, even to an uninformed and casual observer.

Most of the essential defects of the present edifice, which is immediately on the confines of the city, do not admit of repair or remedy; and even if this was not a demonstrable fact, the location, so singularly ill chosen, would present a cogent objection to the permanent establishment by repairs and extended Hospital buildings, upon the present site.

But again—though it might have been conceived by those entrusted with the responsibility of determining the extent of accommodations, that the present edifice was of sufficient capacity for the then understood wants of the patients, it is quite certain that now it cannot receive within its walls *one fourth* of all who are suffering immediately within your own borders, for such remedial treatment as a well-established Institution ought to afford.

I am not able to state the whole number of Insane, epileptics, and idiots in Tennessee, but it is certain that they are no longer to be numbered by *tens*, but by *hundreds*. Some calculators, predicated their estimates on the basis of ascertained facts in most other States, give an amount of from *ten to twelve hundred, in all*. I think this an excess, but allowing that there are but one-half or one-fourth of the above number, the need of much enlarged accommodations is not the less urgent.

There is less insanity in the southern, than in the northern States, proportioned to the inhabitants of each; for this disparity several causes may be assigned: there is, in the former, comparatively but a small influx of foreigners, while they throng every district of the latter. In the Boston City Hospital for the Insane poor, were (in 1846) 169 patients; 99 of which were *foreigners*, 35 natives of other States, and 44 alone residents of the city. Of the 90 foreigners, 70 were Irish. In the New York City Hospital for the Insane poor, on Blackwell's Island, were (on the first of January, 1846,) 356 patients; of whom 226 were foreigners: at present the number exceeds 400. At the Philadelphia City Hospital for the Insane poor, and connected with the Alms House, there were received in one year 395 patients. The above Hospitals were established for the treatment of the Insane poor alone. But a more obvious cause is found in the fact of the much more numerous colored population here than there. The negro and the Indian rarely become subject to the malady of insanity, as neither do the uncivilized tribes and clans of European Russia and Asia. Insanity is the malady of civilized and cultivated life, and of sections and communities whose nervous energies are most roused and nourished.

Upon careful inquiry, it will be discovered that great suffering is experienced in every county of this State, from the want of a suitable Hospital for the Insane poor, as well as for those who are in moderate or affluent circumstances. This proposition admitted, it is clearly a duty to adopt such measures as shall effectually remedy the evil.

Successive Legislatures have, biennially, for a considerable period, made such appropriations from the Treasury as have been found to meet the most obvious wants which have been revealed. The people at large, therefore, are aware that Hospital care for the Insane is desirable, and that it is sustained at least to a limited extent. I apprehend that the insufficiency of this support for present necessities is not widely known and appreciated. It will require no subtle arguments to show that much more is to be done, and it is not Tennessee which will offer the example of slighting the claims of her afflicted children. *Here*, you will not reveal yourselves less true, less honorable, less humane, less just than are your sister States on every hand. Tennessee, which in population and productions ranks fifth in the Union, will not allow her younger or her senior sisters to excel her in what is liberal and humane.* She is abundantly able to

*It may be interesting to some readers to possess the date and place of the principal Hospitals in the United States now occupied, or in progress of construction.

The first Hospital for the Insane was established in Philadelphia, being one department of the Penn Hospital, in the year 1752. This was transferred to Blockley, 1832, a short distance from the city.

The second Institution receiving Insane patients, and the first exclusively for their use, was at Williamsburg, Va., in 1773.

The third was the Friends' Hospital at Frankford, near Philadelphia, in 1817.

The next in succession were the McLean Hospital at Charlestown, now Somerville, near Boston, in 1818, and

Bloomington Hospital, near the city of New York, 1821.

South Carolina Hospital, 1822, at Columbia.

Connecticut Hospital at Hartford; and the

Kentucky Hospital at Lexington, 1824.

Virginia Western Hospital at Staunton, 1828.

Massachusetts State Hospital at Worcester, 1833.

Maryland Hospital at Baltimore, 1834.

Vermont State Hospital, ———, 1837.

New York City Hospital at Blackwell's Island, 1838.

do this good work—she *will* do it; and she will do it *now*, freely, unitedly, and well!

Allow me to state briefly the most prominent defects of the Hospital, at present devoted to the treatment of the Insane.

1st, The interior construction:—the wards in each wing are ill arranged for the proper classification of the patients: the excitable, the noisy, the sick, the languid, and the convalescent, are frequently associated in such sort as to prevent comfort, destroy quiet, and retard recovery. The highly excited patients shut into those wretched cells in the cellar, damp, cold, and unventilated as they are, are not fit for any human creature, much less for the treatment of the sick; and these patients are beneath apartments occupied by others requiring repose, and every comforting and cheering influence. Your superintendent in his last report anticipates my statements, declaring that “the cells belonging to this institution being under ground, and not susceptible of ventilation, are wholly unfit for the habitation of human

Tennessee Hospital at Nashville, 1839.

Boston City Hospital at South Boston, and

Ohio State Hospital at Columbus, 1839.

Maine State Hospital at Augusta, 1840.

New Hampshire State Hospital at Concord, 1842.

New York State Hospital at Utica, 1843.

Mt. Hope Hospital at Baltimore, 1844.

That of Georgia, at Milledgeville, some years since.

The Rhode Island State Hospital and Butler Asylum, at Providence, will probably be opened for patients, under the able conduct of Dr. Ray, early in 1848.

The New Jersey State Hospital, at Trenton, will be ready for occupation in the first or second month of 1848, under the competent superintendence of Dr. Buttolph, so long the respected and indefatigable Assistant at the New York State Hospital.

The Indiana Institution, at Indianapolis, so ably advocated and established by Dr. John Evans, will probably be completed in less than a year.

The State Hospital of Illinois, at Jacksonville, will be finished in about a year and a half.

The Louisiana State Hospital, at Jackson, will probably be occupied within two years.

The Missouri State Hospital will not be completed for two years.

We hope, confidently, in little more than that period, to see the new and much needed Hospital of Tennessee finished and open to receive two hundred and fifty patients to its fostering care and restoring benefits.

beings; and even supposing them to be of value as places of temporary confinement, they are nevertheless utterly useless for any remedial purpose." On a late visit at the Hospital, I found these cells occupied, and the most vehement excitement prevailing, unquestionably stimulated and protracted by the unfortunate circumstances surrounding the patients. The lodging-rooms above are of sufficient size, indeed might without disadvantage be made smaller, but they are either not warmed at all, or insufficiently heated, and not ventilated. In fact, the proper ventilation of the whole building appears to have been entirely overlooked in its construction, and it is not possible to preserve a pure and wholesome atmosphere throughout.

A new warming apparatus, lately introduced at a large cost, is apparently a complete failure: and by its defective construction, allowing the escape of deleterious gases, the patients are in worse condition than before the introduction of the furnaces. In no way, at present apparent, can the temperature either of the day-rooms or the lodging apartments be properly regulated for the feeble or more vigorous patients.

There are in the Hospital no bath rooms; and thus a most important remedial agent is not to be had, except under circumstances of great exposure, and unreasonable extra labor. Convenience is not consulted, nor personal cleanliness attainable in any special department. There are no clothes room, no store rooms, no labor saving arrangements of any description whatever—no convenient dining-rooms, with labor saving dumb-waiters, &c., &c.

The kitchens and laundry are so amazingly defective that the surprise is to witness the accomplishment of daily work in any manner so as to secure the order of domestic economy. There is no bakery, no meat house, no smoke-house, no ice-house, no corn-crib nor meal-bin, no spring-house, milk-house, nor sheds for storing coal, wood, &c., &c.

There are no cisterns, and no wells which afford a supply of water—there is never, I am told, at any season a sufficient supply for culinary and other domestic purposes, much less for the preservation of personal cleanliness. The superin-

tendent informs me that they are often "mainly dependent on the quantity they can haul from the river with one horse, over a distance of a mile and a half!" Wood being used for fuel, a large, if not an ample supply might be saved from the roofs, but *there are no cisterns*, and the casks used are *so few* and so small, that water collected in this way of course fails to meet the demand. The superintendent states in his report, "that during a considerable portion of the year, they have not water even to drink," (*see report, page 7.*) It would require but a very moderate outlay to construct cisterns and tanks, and so furnish *without delay*, what appears indispensably requisite, a supply of wholesome, pure water.* To this plan it is indeed objected, that wood costs more than coal used as fuel—the next remedy then seems to be to economise in fuel, and conduct water through a sub-surface channel from the city water-works, or from the river by horse power and a water-wheel. This should be a first care; for, finally, suppose the occurrence of a conflagration—no improbable event—there at your Institution, and no water at hand to check the progress of the destroying element—suppose it probable that the patients could be removed, (and this is doubtful when the number of care-takers is remembered,) why peril the loss of a valuable edifice, quite suitable to serve many uses, unfit though it is for the residence and proper treatment of the Insane.

There is another want too prominent not to attract notice. It is stated that for a number of patients, varying from *fifty*

*In the New York State Hospital, at Utica, while yet the number of patients was but 200, the daily consumption of water for all purposes was between *three and four thousand* gallons. The supplies were obtained as follows: In addition to rain water, flowing from the roof into six large tanks lined with lead, containing above four thousand gallons each, and placed in the attic stories of the wings, is furnished a well, distant five hundred feet in rear of the Asylum. This well is thirty-three feet deep, sixteen in diameter for twenty-three feet, and then eight feet for the remaining ten. The water is forced from this well by means of a pump, driven by horse-power to the attic story of the centre building, and thence distributed over the whole establishment. One horse will pump from forty to fifty hogsheads in an hour. This apparatus is simple, and applicable in all large Institutions. In nearly every Hospital, supplies are derived in similar or like manner.

to *sixty and seventy*, there are but "*three attendants or nurses.*" Incredible as this seems, I am assured it is the fact—indeed, a reference to the Report previously quoted, (*see page 4.*) exhibits at once the *fact and the assigned cause* in juxtaposition. "*The means at the disposal of the Institution,*" writes the superintendent, "*enable it to employ only two male attendants and one female.*" This admits an effectual and immediate remedy. Reference to the Treasurer's Report of the present year opens the following exhibit for the last two financial years: (*see page 16.*) "*Attendants \$2066 73;*" and directly following, "*Servants hire \$1546 58.*" Perhaps the first charge embraces the salary of the Physician, matron, and steward. There is no table of officers, and it is not shown in either of the documents referred to, that there ever has been any organized body of this sort, as is usual in other Hospitals. I am sure that the Legislature do not purpose that the patients should suffer for lack of necessary care, nor that the Physician should be charged with a responsibility so great as that of guarding the patients from harm, and treating them remedially, without adequate means.

That present legislation is not requisite for authorizing remedy for many actual wants, is apparent in the Statutes for 1839-40: (*see page 208, chap. cxx., sec. 4.*)

"*Be it enacted, That said Board of Trustees shall have power to make such orders and regulations as may be necessary for the government of their patients in the Hospital, its internal police, the supply of provisions, fuel, water, clothing, books, and whatever else may be deemed necessary for the health, comfort, cleanliness, and security of the inmates.*"

This act is certainly benevolent in its aim, and sufficiently full and explicit upon the subject treated.

In most of our State Hospitals, the *average* of nurses and attendants is one nurse to every ten patients. Sometimes the number of patients in charge of one nurse is larger, sometimes fewer, according to the state of the patients and other circumstances. (*See numerous Hospital Reports.*)—Paying patients may, according to the choice of friends, have special nurses wholly devoted to their service. The

night-watch nurses are always chosen with great care.

Too much caution cannot be taken in the choice and selection of nurses for the Insane. Comparatively, the number is not large who are suited to fulfil these duties. Yet they can be found here as elsewhere. They must possess correct principles and self-control: they must be patient, enduring, and forbearing; firm but kind; never requiting injurious language and violent acts with passionate words or vehement demonstrations. To return good for evil must be the invariable rule. No excitement should be exhibited under the wayward conduct and ungracious speech of an intractable patient. Nor must the smallest deviation from truth and sincerity be permitted. The conscientious nurse, and no other, should approach the dependent Insane. None should accept this responsible and careful office, alone for the means of self-support, but because they may, while laboring for their own subsistence, be at the same time rendering a priceless benefit to their fellow-beings. Money alone can never compensate a faithful nurse: an approving conscience must supply the deficiency. It is a rule closely laid down, as far as I have witnessed, in all well-ordered Hospitals, that no attendant shall, under any circumstances, strike a patient. No blow shall ever be inflicted upon those patients, who are so eminently *unaccountable* through the malady under which they suffer—they must be guarded with fidelity, guided with firmness and kindness, and respected in their misfortunes. No attendant should be retained in office one hour, after being known to offend by manifesting any form of violent speech or act towards his patients. I would never make one exception to a rule so necessary to be enforced, and of so searching obligation.*

*In procuring attendants, says Dr. Earle, "every endeavor is used to obtain persons of kind dispositions, and of such character, that they may be looked upon by the patients as companions and friends." Similar opinions are distinctly expressed by all our eminent Physicians. My visits at Hospitals have for years been frequent, and under such circumstances as would show the true condition of the household organizations. I have rarely, very rarely found ill chosen nurses, and I have never known such retained in a hospital claiming rank as a curative Institution, save in two instances, and these, I trust, will not long be quoted for deficiencies in the most important department of these Institutions.

I have represented chiefly the interior defects of the State Hospital, except one deficiency which exists to the same extent in no kindred establishment: I refer to the want of moral means to aid the skill of the Physician in procuring the mental health and boily vigor of his patients. They have neither suitable occupations nor recreations. There are no exercise grounds, no gardens, no fields, where productive and healthful labor in the open air may be carried on. There is no carriage for the use of the feeble patients, when daily exercise abroad would be highly beneficial.—There is no Library, no supply of periodicals fitly selected, for use and entertainment; no musical instruments; no sets of simple games, no work-shops—in short, life in the Hospital seems necessarily, under present circumstances, to be one dull unvarying round of like uninteresting events from day to day, and month to month. Under the head of Moral Treatment, the Physician of the Bloomingdale Hospital renders the following exposition, which in general corresponds with all the best organized and most successful Institutions of the country. I must somewhat abridge the statement:

“We have *religious worship* on the Sabbath; a *school* in the men’s department during the cold season; *lectures* on scientific and miscellaneous subjects, by the superintendent, illustrated by experiments and painted diagrams. The *Library* which contains a thousand volumes; with current newspapers, magazines and reviews, furnishes reading for all who are disposed to use them, and the number is not small. Most of the patients walk out or ride daily in suitable weather.

“Some of the men work in the carpenters’ shop, upon the farm, or about the grounds. Many of the women wash and sew, and assist in keeping their apartments in order. We use also ninepins, quoits, bagatelle, chess, chequers, dominoes, a swing in the grove, &c. We have social parties, from the different wards, but strictly within our own household of course, once a week. There is no undue exposure of the patients. or repetition of their insane conversations abroad. These are our chief moral means.”

"Labor," remarks the superintendent of the Hospital at Utica, "especially gardening and farming, are to the men, in most instances, the favorite amusement. In addition, they resort to reading, writing, ninepins, battledore and ball. The women walk and ride abroad; quilt, complete all sorts of plain work, and almost every kind of fancy article that taste can desire.

"The school is beneficial to those who are convalescent, those who are melancholy, and to those whose mental powers seem sinking into dementia: their memories are thus improved, and they become more active and cheerful. Musical parties for those for whom a little excitement is good, are formed often at evening.

"The want of proper *mental* occupation has, till of late years especially, been much felt in Hospitals for the Insane; this end may now be supplied every where to a great extent."

The choir of singers at evening prayers, and at service on Sundays, is, in most Hospitals, composed of the patients aided by some of the attendants.

Very similar are the moral measures employed by Drs. Bell, Kirkbride, Aul, Allen, Brigham, Butler, Parker, Chandler, and others, as *remedial* means, too valuable to be dispensed with. Mere medical treatment, after the first few days, is usually altogether subordinate to diet, exercise, occupations, and amusements, employed of course always with discrimination.

In the Ohio Asylum, the ladies find great pleasure in cultivating their flower gardens in summer, and their house-plants in winter, and in the use of the needle in plain and fancy work. The most dull, inert, demented patient, may, with kind perseverance, be induced to take part in some work or sport. Dr. Allen, in Kentucky, has been eminently successful with this class.

Dr. Ray, who is high authority, and well known in Europe, as in our own country, for his excellent work, the "Jurisprudence of Insanity," remarks in one of his Reports, while yet he was superintendent of the Maine State Hospital, that "he would be a bold man, who should venture

to say, that Pinel and Esquirol, whose medical treatment was confined chiefly to baths and bitter drinks, were less successful in their cure of mental diseases, than those numerous practitioners who have exhausted upon them all the resources of the healing art. Strictly medical means has less to do than some others, with the treatment of the Insane. In chronic disorders, especially those which are of a nervous character, the means on which the intelligent practitioner chiefly relies with most confidence, are *proper diet and exercise, change of air and scene, useful and agreeable occupation of the mind, and various employments*. Yet much must be done to prepare the system, by the *judicious* application of proper medical remedies, for the efficient action of moral means."

Dr. Trezevant, formerly of the South Carolina Hospital at Columbia, in a clearly written and valuable Report, remarks, that "there is not a year in which I do not see in patients brought to our Hospital, cases of constitutions shattered, and the recuperative energies of the brain entirely destroyed by the free use of the lancet and depleting remedies, before the patient is removed to our care."

In corroboration of these sensible views, I might proceed to adduce other opinions in accordance with them, from the highest authorities in our own country, in England, and in France; this is not here and now requisite: but allow me to direct your inquiries to your State Institution, so deplorably destitute of moral means for the benefit of the patients.

It appears to be universally conceded, that manual labor is eminently desirable for a large class of patients. To this end, it is important that at least one hundred acres of land be attached to the Hospital for cultivation, and other purposes.

The productions from the small farm attached to the Bloomingdale Hospital, at their fair market value, were estimated at \$3,872 99—no inconsiderable sum in the item of table expenses; &c., in the Institution.

A careful, intelligent Physician will be cautious in giving active out-door work to recent patients, whose malady has been of short duration. All cannot be indiscriminately

tasked, or rather employed: neither can the same patients, day by day, do an equal amount of labor. These things will always call for daily supervision, as do all things relating to the hygienic treatment of the patients.

Incurables who are able and willing to work, are more contented, and enjoy better health when employed. The following examples given in a Report of the Bloomingdale Institution, will pleasantly illustrate the benefits of employment for the curable patient. "Two farmers, each of whom possessed a good farm, were admitted into the Asylum, one about a week after the other. They were laboring under the most abject form of melancholy, and had both attempted suicide. In less than a month, their condition being already somewhat improved, they expressed a willingness, and one of them a strong desire, to work out of doors. Being furnished with implements, they daily went out together, and worked upon the farm with as much apparent interest as if it belonged to themselves. Under this course they both rapidly improved, and both were discharged recovered, one at the end of six weeks, and the other three months, from the time of their respective admissions.

"Another man was brought in the spring, in a state of active mania, his appetite was poor, and his frame emaciated. He was careless of his personal appearance, ruthless, turbulent, and almost incessantly talking in an incoherent manner upon the delusions attending his disease. When out of doors, he was wandering to and fro, talking to himself or digging the earth with his hands, without end or object, and generally having his mouth filled with grass. For some months there was but little change in his condition: at length, having become somewhat less bewildered, his attendant succeeded in inducing him to assist in making beds: shortly after, he was employed with the painters and glaziers upon the green-house, and then went to the carpenters' shop, where he worked regularly for several weeks. Meanwhile his bodily health improved, his mind gradually returned to its former integrity, and he was discharged cured of his mental disorder, and weighing more than at any previous period of his life."

In the New York Hospital, a violent patient, after a few weeks special care and medical treatment, was invited to visit the carpenters' shop: he gazed round listlessly, but on a sudden seized a saw and declared he would make a sleigh and explore the frigid zone: he was allowed to carry out his fancy, worked laboriously with the carpenter for several hours daily, till his sleigh was finished—then declaring that there was not yet snow enough for good travelling, he resolved to commence another, and gave the first specimen of his skill to his fellow-workman, the carpenter. It was soon observed that his mind was resuming a healthful tone; his zeal in sleigh-making effectually diverted him from his delusions, and in a few months he returned to his family perfectly restored.

At another Institution, one lady quite recovered her health first diverted from her delusions by an interest in making work baskets of pasteboard and silk for her friends. Another was earnest to make a present to a friend, who was a student of natural history, and betook herself so zealously to copying birds from Audubon's Ornithology, that she forgot her troubles and recovered the use of her reason.

These cases are fair examples of the efficacy of a combination of medical and moral means.

Before the establishment of the City Hospital for the Insane poor, in Boston, Mass., that department of the Alms-House assigned for their occupation, was a place of utter abomination. Scenes too horrible for description might be daily witnessed. These madmen and madwomen were of the most hopeless cases of long standing; their malady confirmed almost, by early adverse circumstances, and following gross mismanagement.

The citizens at length made sensible of great abuses, and conscious of the great injustice of herding these maniacs together, where day and night their shrieks and wild ravings destroyed the least appearance of repose, and where reigned all that was most loathsome and offensive,—resolved on establishing on correct principles, and at large cost, a special Hospital for their residence and treatment. The most sanguine friends of this measure hoped nothing more

for these most wretched beings than to procure for them greater decency and comfort: recovery to the sound exercise of reason not being, under these circumstances, anticipated. The new Hospital was opened and its government declared. The Insane were gradually removed from the old department, disencumbered of their chains, and freed from the remnants of foul garments; they were bathed and clothed, and placed in cheerful, decent apartments, under the superintendence of Dr. Butler—since made superintendent of the Retreat at Hartford, Conn. Thereafter, visit the Hospital when one might, at neither set time nor season, these hitherto most wretched beings would be found well clad, usually tranquil, and capable of various employments in the gardens and within doors, which were advantageous in the economy of the Institution. Some might always be found abroad, exercising under charge of an attendant, or busy in the vegetable and flower gardens; others were in the laundry, in the ironing-room, in the kitchen, &c. Care was had not to allow fatigue by over labor, and the visitor would see amongst those busy ones many of the incurables who had worn out years of misery in a dreary abode: and though of this once miserable company, less than one-sixth were restored to the right use of the reasoning faculties, with but few exceptions they were capable of receiving pleasure from employments and recreations, and of being present in the chapel during religious service, where they were serious and orderly. Than their's no condition could be worse before their removal from the old Institution; afterwards none could be better for creatures of impaired faculties, incompetent as they were to guide and govern themselves, yielding to beneficent influences, and gentle, kindly cares.

In former times, it was judged that severity alone was the power for governing the unfortunate beings who should become subject, through bodily ailments, to loss of capacity for self-care and self-government. It is true, indeed, that, according to early writers, the priests of ancient Egypt received to their charge, persons drooping under deep melancholy, and languishing under nervous diseases, the symp-

toms of which were marked by deep depression or strange delusions. These were conducted to gay pavilions, charming gardens, surrounded by all that was cheerful and animating in nature, or captivating in art, and under a choice diet, often recovered, and went their way to their near or remote abodes! Not such was the discipline in the middle ages and later: no limit was placed before the terrors of the harshest treatment. The first radical reforms are traced to France, from thence have England and America brought the examples which now, in their practical results, bless humanity; restoring, through the exercise of benignant cares, and wise treatment, hundreds and even thousands to health, to usefulness, and all the blessings and benefits of domestic endearments, and social intercourse. With what blessings upon the name of the good Vincent de Paul do we learn of his self-sacrificing efforts to ameliorate the hard lot of the Insane, and then long years following we see Pinel, the benevolent, good man, the enlightened and skilful Physician, apply his noble mind to a thorough reform of those heretofore dreaded receptacles, the Hospitals of France. "It was, said the son of Pinel, in a memorial before the Academy of Arts and Sciences in Paris, "near the close of 1792, that Pinel, after reiterated importunities, induced government to issue a decree, permitting him to unchain the maniacs at Bicetre. After the most vexatious delays, he at last, by every skilful argument, induced M. Couthon, member of the Commune, to meet him at the Hospital, there to witness his first experiments. Couthon himself first proceeded to visit the patients, and to question them, but in return only received abuse and execrations, accompanied by terrible cries, and the clanking of chains. Retreating from the damp and filthy cells, he exclaimed to Pinel, 'Do as you will, but your life will be sacrificed to your false sentiment of mercy.'—Pinel delayed no longer; he selected fifty, who he believed might be released from their chains without danger to others. The fetters were removed, first from twelve, using the precaution of having ready for use, jackets with long continuous sleeves, and closing behind.

"The experiments commenced with a French Captain,

whose history was unknown, save that *he had been in chains forty years!* He was thought to be dangerous; having with a single blow of his manacles at one time killed one of his keepers, so that ever after he was approached with caution. Pinel entered his cell unattended. 'Ah well, Captain, I will cause your chains to be taken off: you shall have liberty to walk in the court, if you will promise to behave like a gentleman, and offer no assaults!' 'I would promise,' responded the maniac, 'but you deride me, you are amusing yourself at my expense; you all fear me.' 'I have six men,' replied Pinel, 'ready to obey my orders; believe me, therefore, I will set you free from this duress, if you will put on this jacket.' The Captain assented; the chains were removed, the jacket laced, the attendants withdrew, but left the door unclosed. He raised himself, but fell; this effort was repeated again and again: the use of his limbs so long constrained, nearly failed: at length trembling, and with tottering steps, he emerged from his dark dungeon. *His first look was at the sky!* 'Ah,' cried he, 'how beautiful!' The remainder of the day he was constantly moving to and fro, uttering continually exclamations of pleasure. He heeded no one: *the flowers, the trees, above all, the sky*, engrossed him. At night he volutarily returned to his cell, which had been cleansed, and furnished with a better bed; his sleep was tranquil and profound. For the two remaining years that he spent at the hospital, he had no recurrence of violent paroxysms, and often rendered good service to the attendants in conducting the affairs of the establishment.

"The next person released after the Captain, was Chevigne, a soldier of the French Guards, who had been in chains ten years, and was always difficult to control. Pinel, entering his cell, announced, that if he would obey his instructions he should be chained no longer. He promised, and executed the directions of his liberator with alacrity and address. Never in the history of the human mind was exhibited a more complete revolution, and this patient, whose best years had been sacrificed in a gloomy cell, in chains and misery, soon showed himself capable of being one of the most useful in the establishment. During the hor-

rors of the Revolution, this man repeatedly saved the life of his benefactor.

Next were released three Russian soldiers, who had been chained together for many years, but none knew when, why, or how they had been committed.

An aged priest next followed, who for twelve years had been a martyr to the most barbarous treatment. In less than a year, Pinel witnessed his entire recovery. He was discharged cured.

In the short period of a few days, this heroic and judicious Physician released more than fifty miserable maniacs: men of various rank and conditions, merchants, lawyers, priests, soldiers, laborers—thus rendering the furious tractable, and creating peace and contentment to a wonderful degree, where had for so many years reigned without interruption the most hideous tumults and outrages.

The efforts of Pinel were not limited to the Bicetre. At La Salpetriere, a ward bears his name, continually reminding the visitor of what France and the world owe to this great Philanthropist.

This rule of kindness, displacing violence and abuse, soon extended to England. The Retreat at York, founded by the society of Friends, was the first so distinguished, as in this country was their Hospital at Frankford the first to recognize and adopt humane laws. In England, the Middlesex Hospital, at Hanwell, under Sir William C. Ellis, first attained celebrity through humane methods of treatment.—His successor, Dr. Conolly, has advocated in his practice, and through his published works, an enlarged liberality and kind treatment.

In Germany, the principles of Pinel, and of his distinguished coadjutor, Esquirol, were established by the lamented Heinroth. The high rank of the Hospital at Leigburg, on the Rhine, under the direction of Jacobi, whose law and practice was "firmness and kindness," is every where known by all who are interested in the ameliorations I have described.

I might adduce innumerable examples witnessed in our Hospitals, and familiar to my own experience in poor-houses,

jails, and private dwellings, where the exchange of kindness for severity; care and nursing for abuse and neglect, have been attended and followed with the happiest results. I do not know of a Hospital bearing the least reputation or trusted with confidence, where chains, severe restraints, or any sort of abuse of *act* or *language* are permitted.

Dr. Conolly, connected with the celebrated Institution at Hanwell in England, for so many years, in a recent letter, published in the October number of the *Westminster Review*, expresses his idea of the obligations of the resident Physician in a Hospital, while wisely objecting to the very serious disadvantages of subjecting these Institutions to the control of a "visiting, consulting Physician."

"The resident medical officer of an Asylum is, and must always be, the most important person in it. No regulations, no caprice of committees, no appointments of other officers, lay or medical, or however designated, can alter his real position in this respect. He is constantly with the patients; their characters are intimately known to him; he watches the effects of all the means of cure to which he resorts, and his own character gives the tone to the whole house. The patients look to him as their friend, protector, and guide. They know that he has authority to control them, and power to confer many indulgences upon them; he is always at hand to be appealed to, and his moral influence is complete. No arbitrary or prospective rule of treatment can be followed among the Insane, from day to day, or even from hour to hour: their varying moods require constant consideration."

Skilful Physicians, of enlarged minds and liberal attainments in our country, spend the best strength of their best years, in conscientious and diligent exertions for the relief of patients entrusted to their care. Most of these men, profoundly impressed with their great responsibilities, devote themselves without reservation to mitigate, by their skill and their cares, the sufferings of the disabled mind. Their interests, their labors, their lives are spent within the Institutions over which they preside, with an earnestness of self-devotion, which, so far as I can discern, bears fair

comparison with no other labors in any of the liberal professions.

It is knowledge of this fact which inspires me with confidence in the treatment of the Insane, in every correctly governed, rightly organized Hospital. Insanity requires a peculiar and appropriate treatment, which cannot be rendered while the patients remain at their own homes, or by even skilful Physicians in general practice. I confide in Hospital care for remedial treatment, and in no other care. One might quote volumes to show, that, however able the patient or his friends may be, to provide in private families every luxury and accommodation, it is hazarding final recovery to make even the experiment of domestic treatment.

Dr. Brigham, in one of his early reports of the New York State Hospital, remarks, that "when sufficient time has elapsed to show clearly that the case is Insanity, unaccompanied by acute disease, then *no time should be lost*, in adopting the most approved remedial measures, among which, as has often been stated, is *removal from home*, to a place where the exciting causes of disease are no longer operative." "Let the friends *fully satisfy themselves that the patient will receive kind treatment*, then, forbear all untimely interference with the remedial measures adopted in the Hospitals of their choice." An individual being Insane, *all ordinary considerations* should give place to the aim of recovery; and this should be steadily adhered to, however discouraging the circumstances, till it is entirely established that the case is beyond the reach of all available means of cure.

But, granting the patient *incurable*, hospital care and protection is hardly less necessary, whether we study the real comfort of the patient, the security and quiet of his family at home, or the safety of society. There are patients sunk into a state of low dementia, who may be considered under all ordinary circumstances harmless, but a numerous portion of those permitted at large, are liable to sudden access of vehement excitements, in which condition, depredations, assaults, suicides, murders, and arson, are commit-

ted, and not seldom under the most pitiable circumstances. Within the last *four* weeks I have seen the record of *thirteen* cases of self-destruction, homicide, and arson by the Insane, recorded under authority. I was induced to visit the ill-conducted jail at Pittsburg, three weeks since, and amidst a throng of disorderly prisoners of all ages, colors, and conditions, found an insane woman charged with the murder of her mother. The poor mother took care of her as best she could, for there was no Hospital within the reach of her means where to place the mad girl in safety, but ordinarily, I was told, she was "looked on as harmless," in a sudden and unexpected paroxysm she murdered her mother in a horrible manner; an attempt, strange to say, was made to bring the well known irresponsible creature to trial, but "she was too crazy for management in the court-room," and so was remanded to prison.

Your own Penitentiary, on the outskirts of this city, has one inmate, charged with the compound crime of murder and arson. The details are too sickening and horrible to relate. It is a most undoubted case of moral insanity, from which no recovery can possibly be expected.

More than two years since, a convict was sent to the Cherry Hill prison, under a long sentence, charged with assault and battery, with intent to rob on the highway; it was evident to every officer, that the man was insane; this was confirmed by the Physician on his first visit, but his sentence had been pronounced, he was legally committed, and could be discharged only by gubernatorial clemency. Some weeks went by, he grew worse, his friends traced him, his history was ascertained; he was a respectable operative in a neighboring manufacturing district: had sickened and became insane upon the sudden decease of a favorite son: his watcher slept, the excited patient escaped half clad, and after running some miles, suddenly leaped into a market wagon which was entering the city: the terrified owner gave the alarm—arrest followed, &c. Finally a pardon was obtained, he was restored to his family, and in a few months was perfectly recovered, and returned to his usual employments.

I might weary you with successive details; but I doubt not your own knowledge reaches in many instances to cases corroborative of my position. *It is not safe, nor is it humane, to leave the Insane, whether curable or incurable, to roam at large, or abide in families, unguarded, unguided, and uncontrolled. For their own sake, for that of their friends, for that of the community, they should be rendered to the kind, skilful, intelligent, judicious watch of Hospital protection.*

Beside the *propriety* and *general obligation* which I assert of placing patients in good Hospitals, there is the great probability of ultimate recovery of the healthy functional action of the brain.

Dr. Bell, of the McLean Hospital at Somerville—whose name commands a respectful confidence rarely exceeded, the skilful Physician, wise friend, judicious superintendent, the good man, he whose cares have restored so many sufferers to their homes, and the blessed affections centering there—has stated, in an early report, and repeated the proposition in succeeding documents, that, “*in an Institution fully provided with attendants, there may be afforded to all except a few highly excited patients, any comfort to which they have been accustomed at home, and all cases certainly recent, whose origin does not date directly or obscurely back more than one year, recover under a fair trial.*” This being the general law, the cases to the contrary counting as the exceptions.”

In the Hospital at Lexington, in 1845–46, of 19 *recent* cases, 16 were discharged cured.

That must indeed be an indiscreet State policy which forfeits the happiness of its citizens to fill its treasury, and even still more reprehensible, when a well defined economy suggests a contrary course. Legislators have not the leisure, as but seldom the opportunity to enter upon suitable investigations of this subject, and therefore facts are collected and placed at their disposal, giving them opportunity of pursuing an enlightened and *just* course.

Dr. Allen, the excellent and successful superintendent of the Kentucky State Hospital, at Lexington, after the expe-

rience of several years, concurs in the opinions quoted above, and urges in eloquent language, the *early* care of the Insane by qualified persons; recommending as the best economy as well as humanity, that a State can practice, prompt and entire provisional care of the Insane.

No fact indeed is better established in all Hospital annals than this; that it is *cheaper* (we now set aside the plea of humanity) to take charge of the Insane in a curative Institution, than to support them elsewhere for life.

In the Massachusetts State Hospital, at Worcester, then in charge of Dr. Woodward, in 1843, twenty-five *old* cases had cost.....\$54,157 00

Average expense of *old* cases 2,166 20

Whole expense of twenty-five *recent* cases till recovered,..... 1,461 30

Average expense of *recent* cases..... 58 45

In the Maine State Hospital at Augusta, in 1842, twelve *old* cases had cost \$25,300 00

Average expense of *old* cases..... 2,108 33

Whole expense of twelve *recent* cases..... 426 00

Average expense of *recent* cases..... 35 50

In the Ohio State Hospital at Columbus, in 1844, thirty-five *old* cases had cost the counties and State,.....\$35,464 00

Average expense of *old* cases..... 1,418 56

Whole expense of twenty-five *recent* cases,..... 1,608 00

Average expense of *recent* cases till recovered.. 64 32

In the Western State Hospital at Staunton, Va., twenty *old* cases had cost.....\$41,633 00

Average expense of *old* cases..... 2,081 65

Whole expense of twenty *recent* cases..... 1,265 00

Average expense of twenty *recent* cases till recovered..... 63 25

It appears unnecessary to multiply examples derived from other Hospitals, whether in locations near to or remote each from the other; but reference to other records may be made, if additional evidence is needed to prove *the economy* both to citizens individually, to counties, or to States, of establishing curative Institutions for the Insane.

I have endeavored to show that your State Hospital is defective for the objects which should be held in view, the *care* and the *comfort* of its inmates. I have tried to exhibit the unfitness of treatment in private families; a few lines will illustrate the only three remaining methods by which the Insane are brought under treatment or disposed of. I mean in the State prison, in the jails, and in the poor-houses.

First, the State prison is a totally unfit place of detention for the Insane, since there, they cannot be cured, if not incurable; they are not fit subjects of discipline; they are not amenable to the rules of a Penitentiary; they are not accountable for violent speech or criminal acts. Danger to officers, danger to convicts, and injury to themselves, accompanies their imprisonment. It is not many years since the Penitentiaries of Massachusetts, of Connecticut, of New York, of Pennsylvania, &c., &c., gave terrible examples to show how easily human life could be taken by the madman, and *of* the madman, in their workshops, in their corridors, and in their cells.

The criminal jurisprudence of Insanity has of late years engaged the careful consideration of some of our ablest jurists and most enlightened citizens. In Europe, France led the way to this wholesome reform, declaring with equal justice and perspicuity, "*that there is no crime nor fault when the party accused was in a state of insanity at the period of the act.*" "Il n'y a ni crime, ni delit lorsque le presence etait en etat de demence au temps de l'action."

In the penal code of Louisiana, compiled by Honorable Edward Livingston, the same declaration appears, though less precisely worded. The penal code of New York lays down the same principle; and Massachusetts more recently and quite effectually protects this case, and declares in addition, (but it is since the murder of a warden in the prison,) that a convict becoming insane while serving out his term of sentence, shall, when the insanity is fully proven, be transferred to the State Hospital.

If a State Penitentiary is an unfit place of custody for a maniac, surely a county jail is not less so: here exist the

same objections as above advanced, only in much increased force; but it is not always the supposed criminal insane man or woman who is liable to be committed to the custodial charge of the jailors: we find too often those unfortunates incarcerated in dreary cells or loathsome dungeons, and this for "safe keeping alone!"

Upon this monstrous abuse of human rights I need not pause to comment.

Finally, in the poor-houses are frequently found the poor who are insane, as well as other afflicted cases, there most inappropriately bestowed. If violent, their phrenzied ravings disturb the members of the household, and disquiet especially the sick, the infirm, and the aged, who should find in these Institutions a comfortable asylum and tranquil home. If blasphemous and unruly, their presence is demoralizing, as well as dangerous to the personal security of other inmates. On the other hand, the Insane are continually exposed to injudicious treatment, to careless oversight, to abuse and insult, nay more, as I have had too much opportunity to know, to gross outrages.

A very large proportion of the Insane of the United States, are either in narrow circumstances or absolutely dependent. In poor-houses they rarely recover the exercise of the reasoning faculties; especially where rigorous discipline is employed. Poor-houses should have every arrangement for the comfort of the aged, the helpless, the cripple—those who are altogether dependent on the public for support, who are unable to care for themselves, or incapable of laboring for their own subsistence, but not including in this class the Insane, whether tranquil or violent.

I submit the question, Gentlemen, whether the poor-houses of Tennessee are fit asylums for the curable or the incurable Insane. If any doubt through want of knowledge from personal observation, I suggest that the poor-house of Davidson county, which I visited last week, and which I am assured is "one of the best in Tennessee"—be visited for purposes of positive information. The Insane will be found there, in ill-repaired out-houses and cold, cheerless cells, though "some," lately inmates, I was told,

were "dead, and others had run away." In inclement weather the patients must suffer severely.

Gentlemen, the object of this memorial is accomplished if I have succeeded in showing you, that you are destitute in this State of that which it has also been my aim to convince you that you need, a *suitable curative Hospital* for all classes of the Insane, and attached thereto a department for such as are considered *incurable*.

"Incurable cases," writes an experienced superintendent, "instead of being immured in jails and county poor-houses, without employment or comfort, where they are continually losing mind and becoming worse, should be placed in good asylums, and have employment on the farm or in shops. In this way they would be rendered much happier, and their existence, if in one sense a blank to themselves, would not be useless to others."

Look over our country at the large class of incurables, oftenest made so by neglect and ill-treatment; see these wretched beings wearing out a mere animal existence through long and dismal years; place yourselves, if you have courage, only in imagination, and for but few hours in their condition, then ask what would you, that, in such circumstances, your fellow-men should do for you? In *act*, let your reply be—"do even so unto them."

Were I to recount but briefly, a hundredth part of the shocking scenes of sorrow, suffering, abuse, and degradation, to which I have been witness—searched out *in jails, in poor-houses, in pens, and block-houses, in dens and caves, in cages and cells, in dungeons and cellars*; men and women in chains, frantic, bruised, lacerated, and debased—your souls would grow sick at the horrid recital. Yet have all these been witnessed, and for successive years shocking facts have been patiently investigated; and why?—in order to solicit and *procure a remedy* for such heart-rending troubles: the only remedy—the *establishment of well-constructed curative Hospitals*. I desire not to nourish morbid sensibilities, nor to awaken transient emotions. The ills for which I ask relief, in the name of all who are suffering, are too real, too profound for transient emotions to work a remedy, or for

sudden sensibilities to heal. I ask you, gentlemen of the Legislature, men of Tennessee, to think, to ponder well, to discuss fairly this subject; then you will not need that I urge other arguments to secure effective action. Fathers, husbands, brothers, friends, citizens—you will require no more earnest solicitations to incite to the accomplishment of this noble work of *benevolence*, of *humanity*, and of *justice*.

Go—look into the dreary cell—behold there the phrenzied, helpless maniac!—go thence, and look into the well-disposed wards of a Hospital—or, rather, go to the home made happy—and behold the Insane “*clothed and in his right mind!*”

You will be prompt to admit that the sentiment of patriotism, whether in its broadest or most limited interpretation, is not to be associated with narrow views, selfish desires, or aims after mere personal aggrandisement. You are here to act from noble motives, pure and exalted principles of integrity. Upon the fidelity with which the representatives of a people discharge the duties of their grave and responsible office, depends the honor, and ultimately the prosperity of our States, and of the United Republic.

That all the affairs of Government ought to be administered with regard to a just and well-directed economy, none can doubt. That a high moral courage should actuate those who control public affairs, is undeniable, if those affairs are to be administered so as to secure the *greatest good for the largest numbers*.

In promoting the establishment of beneficent institutions, the State discharges a just debt to society. The admitted *claims* of the Insane, of the Blind, and of the Deaf and Dumb, are almost universally acknowledged. And let it be remembered, this is not the exercise of *charity*, but the enactment of *justice*; and I repeat a previous affirmation, that efficient provision for the Insane in State Institutions, is the truest *economy*.

Shall I, in conclusion, gentlemen, anticipating the results of your legislation upon this question, state briefly what is needed to remedy existing necessities, and what will, at

the same time, be rendering justice to the humane sentiments, the obligations, the high-mindedness, and to the Federal rank of the State of Tennessee?

The *first* step must be to secure a farm of from one to two hundred acres, a considerable portion of which has been reclaimed by cultivation. It is not desirable that there should be any buildings upon that property, as they would not be available, or in a very unimportant manner. Office buildings must be adapted to a Hospital, not the Hospital conformed to the standing buildings. In the choice of a farm, care must be had that it be reached over good roads, that it be in such vicinity, say within a mile and a half or two miles of the city, as to afford ready daily communication with the markets, shops and post-office, and other accommodations affecting the comfort of the inmates and convenience of the officers: also it should not be too remote from the steam-boat landings, and stage-coach offices, as the transfer of patients would be more expensive and inconvenient. A primary consideration in the choice of a farm, having determined the distance from the town, is, that it furnish an ample, never-failing supply of wholesome water for all domestic, agricultural, and general uses. There must be no oversight here. If coal is to be used for fuel, you must rely on springs and wells: in this country it seems desirable to avoid the vicinity of creeks or any streams subject to overflow their banks. The Ohio Hospital is supplied by cisterns and wells, as are most others; but at the Hospital in charge of Dr. Kirkbride, near Philadelphia, they have on the premises, in addition to those, a pure stream of soft water, affording infailing supplies to the laundry and farm.

Your Commissioners will be instructed to build for *use* and *comfort*, not for display and needless ornament. Every thing which can minister to the recovery and accommodation of the patients should be supplied; all modern improvements in plan, in ventilation, in building, in labor-saving arrangements should be studied, compared, selected from, and such adopted as are best suited to your *climate*, and to the entire provision for not less than two hundred, nor more than two hundred and fifty patients. Let every thing pertaining

to the construction of your Hospital be carefully estimated, only do not suffer wise economy to degenerate into meanness. All appropriations for State charities, or uses lavishly applied, is but robbery of the poor and needy, and brands the vice of extravagance as yet more vicious, through misapplication of the public monies. In building raise the walls of the edifice of brick rather than of stone; save some thousands of dollars by burning the brick upon your own grounds if you have at hand clay of good quality; and this, first, that the cost of transportation is saved, second it may be equally well made at much lower rates. It is the best economy to employ the best workmen in every branch of labor. It is well in all buildings, but especially is it important in the construction of Hospitals, to give the basement its chief elevation above the surface; otherwise dampness occasions many evils not needful to dwell upon here. The lodging-rooms for the patients should be well ventilated by flues and transom windows, and the outer sash so constructed as to be raised or closed without the patients interference. Hot air furnaces, full evaporation of water being secured in the air-chambers, are preferable for heating these buildings throughout, to steam apparatus, being less liable to get out of order if properly constructed than the other, and less liable to injurious accidents if the conducting pipes through any flaw in their make cause explosion.

Avoid in the construction of the Hospital windows, every thing giving the *appearance* of a prison. Build the wings of the Hospital three stories above the basement, thus giving advantages of light, and dry air, and another sound reason for adopting that elevation in preference to an extended area, is, getting the choicest aspects for the greatest number of rooms. I might add also that it is better economy, as there is much less roofing to keep in repair.

An English writer remarks that "there is no doubt that the average atmosphere is purer and better adapted for human breathing at a height of from fifty to one hundred feet above the surface of the earth, than it is at the surface, whether that surface be composed of clay or gravel;" if of vegetable mould it is yet more important to gain elevation for

lodging rooms. The air is drier as you rise above the line of surface evaporation, and poisonous or unwholesome gases are less prevalent.

The Washing establishment, especially in a climate like this, should not be in the *main building*, but removed to a considerable distance, for reasons too obvious to require to be specified.

The Bath rooms as usual in all Hospitals, should be adapted to the accommodation of each class of patients upon each floor of the several wings.

There is another very important point to secure, that the building should be so placed as that the sun's direct rays, at all seasons, may, during some portion of the day reach all occupied apartments. It is not needful to discuss here the soundness of this position, sustained by philosophy and plain reason as it is.

Perhaps I am tedious, but all these things are more important in securing health than is commonly estimated. And while we are seeking physical health for patients, through which perfect mental health alone can be ensured, we certainly do most wisely to adopt all those rules of hygiene which modern science and intelligence supply.

Tennessee has been called "the Mother of States!" Shall she not, by the *promulgation of wise laws*, the liberal encouragement of *schools of learning*, and the substantial support of *beneficent Institutions*, offer an example for the young States she has so largely and widely colonized? Embalming her memory in the hearts of her grateful children, they hereafter, reverting to their mother-land, with fond veneration and pride shall declare, how noble her example, and hasten to emulate her exalted aims!

Respectfully submitted,

D. L. DIX.

NASHVILLE, NOVEMBER, 1847.



